

Family & Community Education Referral Form

PLEASE PRINT VERY CLEARLY

Name of Individual Referred for Services:		Address:			City & Zip	
Age:	Daytime Phone:		Email: No Email			
Ethnicity		Male:	Female:	Court Ordered:		# of Children, If Applicable:
				Yes	No	Yes
				Yes	No	
Social Worker's Name:			Office Phone:		Email:	

ALL COURSES SHOULD HAVE A MINIMUM OF 4 COMMITTED INDIVIDUALS TO BEGIN.
CHILDCARE IS NOT AVAILABLE

PLEASE PRINT INFORMATION CLEARLY BELOW:

Child's First & Last Name	Gender	Age	Ethnicity	Is Child in Foster Care?	Is CPS Referring?
	M or F				
	M or F				
	M or F				
	M or F				
	M or F				

The information provided above is for statistical reporting ONLY. Names will not be used in conjunction with the data reported.

PLEASE (✓) CHECK PROGRAM(S) YOU ARE REFERRING THE ABOVE INDIVIDUAL TO ATTEND.

PROGRAM'S CORE COURSES:

- ___ Birth to Five = Date/Location _____
- ___ 6 to 12 Years Parenting = Date/Location _____
- ___ Active Parenting of Teens = Date/Location _____
- ___ Anger Management (8 hours) = Date/Location _____
- ___ Co-Parenting Seminar (4 hours) = Date/Location _____

PROGRAM'S OCASSIONAL COURSES (PLEASE ASK IF BELOW COURSES ARE BEING HELD):

- ___ Fatherhood Courses _____
- ___ Infant Massage _____
- ___ Pre-School Preparation Training for Parents & Their Pre-School Child _____
- ___ Babysitting Training for Girls & Boys 10 to 15 Years Old _____
- ___ Budgeting, You Have More Money Than You Think _____
- ___ Other, Workshops, etc. _____

These courses are free to the community. None of the courses are meant to take the place of professional counseling or medical services. The Newport News Department of Human Services – Parenting Programs cannot mandate a referred individual to attend any program they are assigned to take. The course dates, times and locations are subject to change without prior notice to the general public, please check with the office for any changes at 369-6807.

Please Indicate ALL Information That Could Be a Factor In Placing This Person In The Appropriate Course: (i.e. are there any Protective Orders, Mental Health or Literacy Issues, With or Without Their Children, etc.) on the Back of this Form.

Department of Human Services – Prevention & Self-Sufficiency Bureau – 746 Adams Drive – Newport News, VA 23601

Office Phone (757) 369-6807 - FAX (757) 369-6839